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Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	MR1715-75
First Inventor	Cheng-Hui Hsu
Title	IMPROVED STRUCTURE TAPE RULE HOUSING
Express Mail Label No. [Redacted]	

06/25/03

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Applicant claims small entity status.
See 37 CFR 1.27.

3. Specification [Total Pages 7]
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings *(if filed)*
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total Sheets 3]

5. Oath or Declaration [Total Pages 1]

a. Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)

i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*

- a. Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
- c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS		
9. <input type="checkbox"/>	Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/>	37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>	<input type="checkbox"/> Power of Attorney
11. <input type="checkbox"/>	English Translation Document <i>(if applicable)</i>	
12. <input type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/>	Preliminary Amendment	
14. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
15. <input type="checkbox"/>	Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
16. <input type="checkbox"/>	Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/>	Other:	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No.: _____

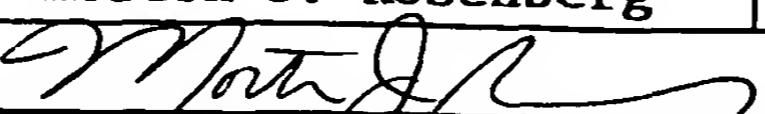
Prior application information: Examiner _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<input type="checkbox"/> or	<input type="checkbox"/> Correspondence address below
Name	Morton J. Rosenberg, Esq. Rosenberg, Klein & Lee		
Address	3458 Ellicott Center Drive - Suite 101		
City	Ellicott City	State	MD
Country	USA	Telephone	410-465-6678
Fax	410-461-3057		

Name (Print/Type)	Morton J. Rosenberg	Registration No. (Attorney/Agent)	26,049
Signature			Date 22 Aug. 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	375.00
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Complete if Known

Application Number	
Filing Date	
First Named Inventor	Cheng-Hui Hsu
Examiner Name	
Art Unit	
Attorney Docket No.	MR1715-75

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number
Deposit Account Name

18-2011

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

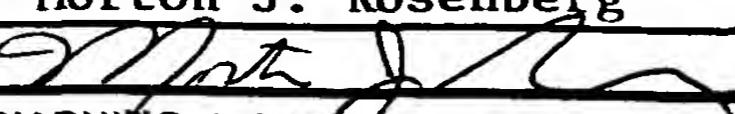
Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 740	2001 370			Utility filing fee	\$ 375
1002 330	2002 165			Design filing fee	
1003 510	2003 255			Plant filing fee	
1004 740	2004 370			Reissue filing fee	
1005 160	2005 80			Provisional filing fee	
SUBTOTAL (1)		(\$)		375	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
1	-	-	-20**	= - X 9 = 0	
1	-	-	-3**	= - X 42 = 0	
				140	0

Large Entity	Small Entity	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$) 0

** or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		(Complete if applicable)		
Name (Print/Type)	Morton J. Rosenberg	Registration No. (Attorney/Agent)	26,049	Telephone 410-465-6678
Signature		Date	22 Aug. 2003	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.